



For calendar year 2020 or tax years beginning (MM-DD-YY) \_\_\_ - \_\_\_ - 20\_\_\_, and ending (MM-DD-YY) \_\_\_ - \_\_\_ - 20\_\_\_

<b>A Entity Type</b>  <input type="checkbox"/> Partnership <input type="checkbox"/> S Corporation <input type="checkbox"/> General Partnership	<b>B FEIN/SSN</b>  _____  Name of Pass-Through Entity _____	<b>C Kentucky Corporation/LLET Account Number (Required)</b>  _____  <input type="checkbox"/> Change of Name Telephone Number _____										
<b>D LLET Exemption Code</b>  <div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div>	Number and Street _____  City _____ State _____ ZIP Code _____	State of Organization _____  Date of Organization ____ / ____ / ____										
<b>E Income Tax Exemption Code</b>  <div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div>	<b>G Check applicable boxes</b> <table style="width:100%; border: none;"> <tr> <td><input type="checkbox"/> Publicly traded partnership</td> <td><input type="checkbox"/> Initial return</td> </tr> <tr> <td><input type="checkbox"/> Qualified investment partnership</td> <td><input type="checkbox"/> Change of accounting period</td> </tr> <tr> <td><input type="checkbox"/> LLC</td> <td><input type="checkbox"/> Amended return (Complete Part V)</td> </tr> <tr> <td><input type="checkbox"/> LP</td> <td><input type="checkbox"/> Short-period return (Complete Part IV)</td> </tr> <tr> <td><input type="checkbox"/> LLP</td> <td><input type="checkbox"/> Final return (Complete Part IV)</td> </tr> </table>	<input type="checkbox"/> Publicly traded partnership	<input type="checkbox"/> Initial return	<input type="checkbox"/> Qualified investment partnership	<input type="checkbox"/> Change of accounting period	<input type="checkbox"/> LLC	<input type="checkbox"/> Amended return (Complete Part V)	<input type="checkbox"/> LP	<input type="checkbox"/> Short-period return (Complete Part IV)	<input type="checkbox"/> LLP	<input type="checkbox"/> Final return (Complete Part IV)	Principal Business Activity in KY _____  NAICS Code Number in KY _____
<input type="checkbox"/> Publicly traded partnership	<input type="checkbox"/> Initial return											
<input type="checkbox"/> Qualified investment partnership	<input type="checkbox"/> Change of accounting period											
<input type="checkbox"/> LLC	<input type="checkbox"/> Amended return (Complete Part V)											
<input type="checkbox"/> LP	<input type="checkbox"/> Short-period return (Complete Part IV)											
<input type="checkbox"/> LLP	<input type="checkbox"/> Final return (Complete Part IV)											
<b>F Provider 3-Factor Apportionment Code</b>  <div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div>	<b>H K-1 and Owner Information</b> _____ Schedule(s) K-1 Issued      _____ Other Type of Owners _____ Resident Owners              _____ Schedule(s) K-1 Received _____ Nonresident Owners											

**PART I—ORDINARY INCOME (LOSS) COMPUTATION**

1 Federal ordinary income (loss)	▶ 1	00
<b>ADDITIONS TO FEDERAL ORDINARY INCOME</b>		
2 State taxes based on net/gross income	▶ 2	00
3 Federal depreciation (do not include IRC § 179 expense deduction)	▶ 3	00
4 Related party expense (attach Schedule RPC)	▶ 4	00
5 (Loss) from Form 4797 found on federal Form 1120S, line 4 or federal Form 1065, line 6	▶ 5	00
6 Gain from Kentucky Form 4797, line 17	▶ 6	00
7 Federal allowable depletion from Form 1120S, line 15 or Form 1065, line 17	▶ 7	00
8 Enter additions to federal taxable income from Kentucky Schedule(s) K-1.	▶ 8	00

<b>OFFICIAL USE ONLY</b>					
<table style="width:100%; border: none;"> <tr> <td style="border: none; padding-right: 5px;">P W 2 0 4</td> <td style="border: 1px solid black; width: 90%; height: 20px;"></td> <td style="border: none; padding-left: 5px;">V A L #</td> <td style="border: 1px solid black; width: 10%; height: 20px;"></td> </tr> </table>	P W 2 0 4		V A L #		
P W 2 0 4		V A L #			

**PART I—ORDINARY INCOME (LOSS) COMPUTATION—continued**

9	Internal Revenue Code adjustments (see instructions)	▶ 9		00
10	Other additions ( <b>attach explanation</b> )	▶ 10		00
11	<b>Total</b> (add lines 1 through 10)	▶ 11		00
<b>SUBTRACTIONS FROM FEDERAL ORDINARY INCOME</b>				
12	Federal work opportunity credit	▶ 12		00
13	Kentucky depreciation (do not include IRC § 179 expense deduction)	▶ 13		00
14	Gain from Form 4797 found on federal Form 1120S, line 4 or federal Form 1065, line 6	▶ 14		00
15	(Loss) from Kentucky Form 4797, line 17	▶ 15		00
16	Kentucky allowable depletion	▶ 16		00
17	Enter subtractions from federal taxable income from Kentucky Schedule(s) K-1.	▶ 17		00
18	Internal Revenue Code adjustments (see instructions)	▶ 18		00
19	Other subtractions ( <b>attach explanation</b> )	▶ 19		00
20	Total subtractions (add lines 12 through 19)	▶ 20		00
21	<b>Kentucky ordinary income (loss)</b> (line 11 less line 20)	▶ 21		00



**PART II—LLET COMPUTATION**

1	Schedule L, Section E, line 1 (Page 11)	▶ 1		00
2	Tax credit recapture	▶ 2		00
3	Total (add lines 1 and 2)	▶ 3		00
4	Nonrefundable LLET credit from Kentucky Schedule(s) K-1	▶ 4		00
5	Nonrefundable tax credits ( <b>attach Schedule TCS</b> )	▶ 5		00
6	<b>LLET liability</b> (greater of line 3 less lines 4 and 5 or \$175 minimum)	▶ 6		00
7	Estimated tax payments	▶ 7		00
8	Certified rehabilitation tax credit	▶ 8		00
9	Film industry tax credit	▶ 9		00
10	Extension payment	▶ 10		00
11	Prior year's tax credit	▶ 11		00
12	Income tax overpayment from Part III, line 13	▶ 12		00
13	LLET paid on original return	▶ 13		00
14	LLET overpayment on original return	▶ 14		00
15	Estimated Tax Penalty ( <b>attach Form 2220-K</b> )	▶ 15		00
16	<b>LLET and Estimated Tax Penalty due</b> (lines 6, 14, and 15 less lines 7 through 13)	<b>OWE</b> ▶ 16		00
17	<b>LLET overpayment</b> (lines 7 through 13 less lines 6, 14, and 15)	▶ 17		00
18	Credited to 2020 income tax	▶ 18		00
19	Credited to 2020 interest	▶ 19		
20	Credited to 2020 penalty	▶ 20		
21	Credited to 2021 LLET	▶ 21		00
22	<b>Amount to be refunded</b> (line 17 less lines 18 through 21)	<b>REFUND</b> ▶ 22		



**PART III—INCOME TAX COMPUTATION (For S-Corporations or Partnerships)**

By checking the box, the Partnership elects to pay the tax on behalf of its partners due to an IRS audit per KRS 141.211(4).

1	Excess net passive income tax	▶ 1		00
2	Built-in gains tax	▶ 2		00
3	Tax installment on LIFO recapture	▶ 3		00
4	<b>Total</b> (add lines 1 through 3, but not less than zero)	▶ 4		00
5	Estimated tax payments	▶ 5		00
6	Extension payment	▶ 6		00
7	Prior year's tax credit	▶ 7		00
8	LLET overpayment from Part II, line 18	▶ 8		00
9	Income tax paid on original return	▶ 9		00
10	Income tax overpayment on original return	▶ 10		00
11	<b>Income tax due</b> (lines 4 and 10 less lines 5 through 9)	<b>OWE</b> ▶ 11		00
12	<b>Income tax overpayment</b> (lines 5 through 9 less lines 4 and 10)	▶ 12		00
13	Credited to 2020 LLET	▶ 13		00
14	Credited to 2020 interest	▶ 14		
15	Credited to 2020 penalty	▶ 15		
16	Credited to 2021 corporation income tax	▶ 16		00
17	<b>Amount to be refunded</b> (line 12 less lines 13 through 16)	<b>REFUND</b> ▶ 17		





**SCHEDULE Q—QUESTIONNAIRE**

**IMPORTANT:** Questions 1 and 2 must be answered if this is the pass-through entity's initial return or if a return was not filed under the same name and same federal I.D. number for the preceding year. **Failure to do so may result in a request for a delinquent return.**

- 1 Indicate whether:
- (a)  new business
  - (b)  successor to previously existing business which was organized as:
    - (1)  corporation;
    - (2)  partnership;
    - (3)  sole proprietorship; or,
    - (4)  other \_\_\_\_\_

If successor to previously existing business, give name, address, and federal I.D. number of the previous business organization.

Name
FEIN    ___ - _____
Address

- 2 If a foreign pass-through entity, enter the date qualified to do business in Kentucky.

\_\_\_ / \_\_\_ / \_\_\_\_\_

**Questions 3–7 must be completed by all pass-through entities.**

- 3 The pass-through entity's books are in care of:

Name
Address

- 4 Are disregarded entities included in this return?  
 **Yes**    **No**

If yes, attach **Schedule DE**.

- 5 For the taxable period being reported, was the pass-through entity a partner or member in a pass-through entity doing business in Kentucky?  
 **Yes**    **No**

If yes, list the name(s) and federal I.D. number(s) of the pass-through entity(ies).

<b>A</b>	Name
	FEIN    ___ - _____
<b>B</b>	Name
	FEIN    ___ - _____
<b>C</b>	Name
	FEIN    ___ - _____
<b>D</b>	Name
	FEIN    ___ - _____
<b>E</b>	Name
	FEIN    ___ - _____
<b>F</b>	Name
	FEIN    ___ - _____
<b>G</b>	Name
	FEIN    ___ - _____

- 6 For taxable period being reported, was the pass-through entity doing business in Kentucky other than through its interest held in a pass-through entity doing business in Kentucky?  
 **Yes**    **No**

- 7 Was this return prepared on:  
 (a)  cash basis  
 (b)  accrual basis  
 (c)  other \_\_\_\_\_



**SCHEDULE K—OWNER’S SHARE OF INCOME, CREDITS, DEDUCTIONS, ETC.**

SECTION A	Distributive Share Items	Total Amount
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1	Kentucky ordinary income (loss) from trade or business activities (Page 2, Part I, line 21)	▶ 1	00
2	Net income (loss) from rental real estate activities <b>(attach federal Form 8825)</b>	▶ 2	00
3	(a) Gross income from other rental activities	▶ 3(a)	00
	(b) Less expenses from other rental activities (attach schedule)	▶ (b)	00
	(c) Net income (loss) from other rental activities (line 3(a) less line 3(b))	▶ (c)	00
4	Portfolio income (loss):		
	(a) Interest income	▶ 4(a)	00
	(b) Dividend income	▶ (b)	00
	(c) Royalty income	▶ (c)	00
	(d) Net short-term capital gain (loss) <b>(attach federal Schedule D and Kentucky Schedule D, if applicable.)</b>	▶ (d)	00
	(e) Net long-term capital gain (loss) <b>(attach federal Schedule D and Kentucky Schedule D, if applicable.)</b>	▶ (e)	00
	(f) Other portfolio income (loss) (attach schedule)	▶ (f)	00
5	<b>Partnerships Only:</b> Guaranteed payments to partners	▶ 5	00
6	IRC § 1231 net gain (loss) (other than due to casualty or theft) <b>(attach federal Form 4797 and Kentucky Form 4797)</b>	▶ 6	00
7	Other income (loss) (attach schedule)	▶ 7	00
8	Charitable contributions (attach schedule)	▶ 8	00
9	IRS § 179 expense deduction <b>(attach federal Form 4562 and Kentucky Form 4562)</b>	▶ 9	00
10	Deductions related to portfolio income (loss) (attach schedule)	▶ 10	00
11	Other deductions (attach schedule)	▶ 11	00



**SCHEDULE K—OWNER’S SHARE OF INCOME, CREDITS, DEDUCTIONS, ETC.—continued**

**SECTION A—continued**

**Distributive Share Items**

**Total Amount**

**Investment Interest**

12 (a) Interest expense on investment debts	▶ 12(a)		00
(b)(1) Investment income included on Section A, lines 4(a), 4(b), 4(c), and 4(f)	▶ (b)(1)		00
(b)(2) Investment expenses included on Section A, line 10	▶ (b)(2)		00

**Non-Refundable Tax Credits (see instructions)**

13 Enter the applicable tax credit:

(a) _____	▶ 13(a)		00
(b) _____	▶ (b)		00
(c) _____	▶ (c)		00

**GENERAL PARTNERSHIPS ONLY—Refundable Tax Credits**

14 Certified rehabilitation tax credit (attach Kentucky Heritage Council certification(s))	▶ 14		00
15 Film industry tax credit (attach Kentucky Film Office certification(s))	▶ 15		00

**Other Items**

16 (a) Type of IRC §59(e)(2) expenditures ▶ _____ (b) Amount of IRC §59(e)(2) expenditures	▶ 16(b)		00
17 Tax-exempt interest income	▶ 17		00
18 Other tax-exempt income	▶ 18		00
19 Nondeductible expenses	▶ 19		00
20 Property distributions (including cash) other than dividend distributions reported to you on Form 1099-DIV	▶ 20		00
21 Supplemental information required to be reported to each owner (attach schedule)	▶ 21		00
22 <b>S-corporations only:</b> Total dividend distributions paid from accumulated earnings and profits	▶ 22		00





**SCHEDULE K—OWNER’S SHARE OF INCOME, CREDITS, DEDUCTIONS, ETC.—continued**

**SECTION B—LLET Pass-through Items (Required)**

1 Kentucky gross receipts from Schedule L, Section A, line 2	▶ 1		00
2 Total gross receipts from Schedule L, Section B, line 1	▶ 2		00
3 Kentucky gross profits from Schedule L, Section A, line 5	▶ 3		00
4 Total gross profits from Schedule L, Section B, line 3	▶ 4		00
5 Limited liability entity tax (LLET) nonrefundable credit from page 3, Part II, the total of lines 4 and 6, less \$175	▶ 5		00

**SECTION C—Apportionment Pass-through Items**

1 Kentucky receipts from Schedule A, Part I, line 1	▶ 1		00
2 Total receipts from Schedule A, Part I, line 2	▶ 2		00

**SECTION D—Apportionment for Providers (KRS 141.121(1)(e))**

1 Kentucky property from Schedule A, Part I, line 5	▶ 1		00
2 Total property from Schedule A, Part I, line 6	▶ 2		00
3 Kentucky payroll from Schedule A, Part I, line 8	▶ 3		00
4 Total payroll from Schedule A, Part I, line 9	▶ 4		00



**SCHEDULE L—LIMITED LIABILITY ENTITY TAX COMPUTATION**

Check the box and complete Schedule L-C, Limited Liability Entity Tax—Continuation Sheet, if the limited liability pass-through entity filing this tax return is a partner or member of a limited liability pass-through entity or general partnership doing business in Kentucky. Enter the total amounts from Schedule L-C in Section A of this schedule.

**SECTION A—Computation of Kentucky Gross Receipts and Gross Profits**

1(a) Gross receipts less returns and allowances	▶ 1(a)		00
(b) Kentucky statutory gross receipts reductions	▶ (b)		00
2 Adjusted gross receipts (line 1(a) less line 1(b))	▶ 2		00
3(a) Cost of goods sold ( <b>attach Schedule COGS</b> )	▶ 3(a)		00
(b) Kentucky statutory cost of goods sold reductions	▶ (b)		00
4 Adjusted cost of goods sold (line 3(a) less line 3(b))	▶ 4		00
5 Gross profits (line 2 less line 4)	▶ 5		00

**SECTION B—Computation of TOTAL Gross Receipts and Gross Profits**

1 Adjusted gross receipts	▶ 1		00
2 Cost of goods sold ( <b>attach Schedule COGS</b> )	▶ 2		00
3 Gross profits (line 1 less line 2)	▶ 3		00



**If Section B, Line 1 or 3 is \$3,000,000 or less, SKIP Sections C and D and enter \$175 in Section E, Line 1 and then enter \$175 on page 3, Part II, Line 1. Otherwise, continue to Section C on the next page.**



**SCHEDULE L—LIMITED LIABILITY ENTITY TAX COMPUTATION—continued**

**SECTION C—Computation of Gross Receipts LLET**

1 If gross receipts from all sources (Section B, line 1) are greater than \$3,000,000, but less than \$6,000,000, enter the following:

$$\text{(Section A, line 2} \times 0.00095) - \left[ \frac{\$2,850 \times (\$6,000,000 - \text{Section A, line 2})}{\$3,000,000} \right]$$

but in no case shall the result be less than zero.

▶ 1  00

2 If gross receipts from all sources (Section B, line 1) are \$6,000,000 or greater, enter the following: Section A, line 2 x 0.00095.

▶ 2  00

3 Enter the amount from line 1 or line 2.

▶ 3  00

**SECTION D—Computation of Gross Profits LLET**

1 If gross profits from all sources (Section B, line 3) are greater than \$3,000,000, but less than \$6,000,000, enter the following:

$$\text{(Section A, line 5} \times 0.0075) - \left[ \frac{\$22,500 \times (\$6,000,000 - \text{Section A, line 5})}{\$3,000,000} \right]$$

but in no case shall the result be less than zero.

▶ 1  00

2 If gross profits from all sources (Section B, line 3) are \$6,000,000 or greater, enter the following: Section A, line 5 x 0.0075.

▶ 2  00

3 Enter the amount from line 1 or line 2.

▶ 3  00

**SECTION E—Computation of LLET**

1 Enter the lesser of Section C, line 3 or Section D, line 3 here and on Page 3, Part II, line 1. If less than \$175, enter the minimum of \$175 here and on Page 3, Part II, line 1.

▶ 1  00